STATE OF SOUTH DAKOTA

Statement of Legal Newspaper Ownership and Circulation SEC. OF STATE

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077			
1. TITLE OF NEWSPAPER	Lades Mix Co	anter News	2-DATE Sept. 28-11
3. FREQUENCY OF ISSUE	3A. NO. OF ISSUES PUBLIS		. ANNUAL SUBSCRIPTION
Weekly	52		ICE \$ 28.00 -32.00
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code)			
(Not printers)			
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE			
PUBLISHER (Not printers)			
6 FULL NAME OF PURISHED.			
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and			
addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the			
names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name			
and address, as well as that of each individual must be given.			
FULL NAME COMPLETE MAILING ADDRESS			
First State Bank- Hedder, SD 5 2342 P.O. Box 252			
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1			
PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so			
state. If more space is needed, list on back of this form.			
		AVERAGE NO. COPIE	
	CVD CVW A TVOVI	EACH	ACTUAL NO. COPIES
9. EXTENT AND NATURE OF CIRCULATION		ISSUED PRECEDING	ISSUED NEAREST TO FILING DATE
		MONTHS	1 Co
A.TOTAL NO. COPIES (Net Press Run)		690	690
B.PAID AND/OR REQUESTED CIRCULATION			
1. Sales through dealers and carriers, street vendors and		10	14
counter sales. 2. Mail Subscription		10	
(Paid and or requested)		643	643
C.TOTAL PAID AND/OR REQUESTED CIRCULATION			1 ~ 1
(Sum of 9B1 and 9B2)		<u>653</u>	657
D.FREE DISTRIBUTION		1	
1. BY MAIL, CARRIER OR OTHER MEANS		10	/0
2. SAMPLES, COMPLIMENTARY AND OTHER FREE			
COPIES		C	0
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)		663	667
F. COPIES NOT DISTRIBUTED		0 1	0.0
1. Office use, left over, unaccounted, spoiled after printing		27	23
2. Return from News Agents	5		
G.TOTAL (Sum of E, F1 and F2 – Should equal net press run shown in A)		690	690
Statement must be signed by	Publisher, Business Manag	ger, or Owner in the pr	resence of a Notary Public
I swear that the statement	ts made by me are true. c	orrect, and complete	:
1 Swell that the statement		•	
Thereon & Boar			
(Signature)		(Title)	
State of South Dakota Sworn to before me this <u>36</u> day of <u>Supt</u>			ay of 5101, 2011
State of South Parious		WILL TRICKERING	
County of Charles MK, \$		Notary Public	
Teatron (Applie		My commission expires: ALLY 20 2014	
(Seal)		J	

Form: SOS REC 051 7/2004